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10/01/01

UTILITY PATENT APPLICATION TRANSMITTAL

Only for new nonprovisional applications under 37 CFR 1.53(b)

Attorney Docket No. 300622005400

First Inventor Daniel SANTI, Robert McDANIEL, Li TANG, Chaitan KHOSLA

Title OVERPRODUCTION HOSTS FOR BIOSYNTHESIS OF POLYKETIDES

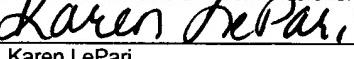
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CERTIFICATE OF MAILING BY "EXPRESS MAIL"

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Date of Deposit: May 1, 2001

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and is addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231.



Karen LePari

| APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small> | | ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231 | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|----------------|
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small> | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) | | |
| 2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small> | 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> | | |
| 3. <input checked="" type="checkbox"/> Specification <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure | a. <input type="checkbox"/> Computer Readable Form (CRF) | | |
| 4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) <small>[Total Sheets 3]</small> | b. <input type="checkbox"/> Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper | | |
| 5. <input type="checkbox"/> Oath or Declaration <small>[Total Pages 1]</small> | c. <input type="checkbox"/> Statements verifying identify of above copies | | |
| a. <input type="checkbox"/> Newly executed (original or copy) | 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) | | |
| b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 17 completed)</small> | 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <small>(where there is an assignee)</small> | | |
| i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</small> | 11. <input type="checkbox"/> English Translation document (if applicable) | | |
| 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 | 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 | | |
| 18. If a CONTINUATING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: | | 13. <input type="checkbox"/> Preliminary Amendment | |
| | | 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>Should be specifically itemized</small> | |
| | | 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> | |
| | | 16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. | |
| | | 17. <input type="checkbox"/> Other _____ | |
| ACCOMPANYING APPLICATION PARTS | | | |
| 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) | | | |
| 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <small>(where there is an assignee)</small> | | | |
| 11. <input type="checkbox"/> English Translation document (if applicable) | | | |
| 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 | | | |
| 13. <input type="checkbox"/> Preliminary Amendment | | | |
| 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>Should be specifically itemized</small> | | | |
| 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> | | | |
| 16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. | | | |
| 17. <input type="checkbox"/> Other _____ | | | |
| 19. CORRESPONDENCE ADDRESS | | | |
| <input type="checkbox"/> Customer Number or Bar Code Label | | <input type="checkbox"/> Correspondence address below | |
|  25225 <small>PATENT TRADEMARK OFFICE</small> | | | |
| <small>(Insert Customer No. or Attach bar code label here)</small> | | | |
| Name | CAROLYN A. FAVORITO | | |
| Address | MORRISON & FOERSTER 3811 VALLEY CENTRE DRIVE, SUITE 500 | | |
| City | SAN DIEGO | State | CA |
| Country | | Telephone | Zip Code 92130 |
| Name (Print/Type) | CAROLYN A. FAVORITO | Registration No. (Attorney) | 39,183 |
| Signature | Carolyn A. FAVORITO Date May 1, 2001 | | |

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1961
S PTO

FEE TRANSMITTAL FOR FY 2001

Patent fees are subject to annual revision.

Complete if Known

| | |
|----------------------|--------------------------------------------------------|
| Application Number | Unknown |
| Filing Date | Herewith |
| First Named Inventor | Daniel SANTI, Robert McDANIEL, LI TANG, Chaitan KHOSLA |
| Examiner Name | Not Assigned |
| Group Art Unit | Not Assigned |

TOTAL AMOUNT OF PAYMENT

(\$ 0)

Attorney Docket No. 300622005400

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 03-1952

Deposit Account Name Morrison & Foerster LLP

 Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

 Check Credit Card Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Fee Code | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description | Fee Paid |
|----------------|-----------------|----------------|-----------------|------------------------------------------------------------------------------|----------|
| 105 | 130 | | 205 | Surcharge - late filing fee or oath | |
| 127 | 50 | | 227 | Surcharge - late provisional filing fee or cover sheet | |
| 139 | 130 | | 139 | Non-English specification | |
| 147 | 2,520 | | 147 | For filing a request for ex parte reexamination | |
| 112 | 920* | | 112 | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | | 113 | Requesting publication of SIR after Examiner action | |
| 115 | 110 | | 215 | Extension for reply within first month | |
| 116 | 390 | | 216 | Extension for reply within second month | |
| 117 | 890 | | 217 | Extension for reply within third month | |
| 118 | 1,390 | | 218 | Extension for reply within fourth month | |
| 128 | 1,890 | | 228 | Extension for reply within fifth month | |
| 119 | 310 | | 219 | Notice of Appeal | |
| 120 | 310 | | 220 | Filing a brief in support of an appeal | |
| 121 | 270 | | 221 | Request for oral hearing | |
| 138 | 1,510 | | 138 | Petition to institute a public use proceeding | |
| 140 | 110 | | 240 | Petition to revive - unavoidable | |
| 141 | 1,240 | | 241 | Petition to revive - unintentional | |
| 142 | 1,240 | | 242 | Utility issue fee (or reissue) | |
| 143 | 440 | | 243 | Design issue fee | |
| 144 | 600 | | 244 | Plant issue fee | |
| 122 | 130 | | 122 | Petitions of the Commissioner | |
| 123 | 50 | | 123 | Petitions related to provisional applications | |
| 126 | 180 | | 126 | Submission of Information Disclosure Stmt | |
| 581 | 40 | | 581 | Recording each patent assignment per properties (times number of properties) | |
| 146 | 710 | | 246 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 | 710 | | 249 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 | 710 | | 279 | Request for Continued Examination (RCE) | |
| 169 | 900 | | 169 | Request for expedited examination of a design application | |

SUBTOTAL (1) (\$ 710.00)

2. EXTRA CLAIM FEES

Extra Claims Fee from below Fee Paid

| | | | | |
|----------------------------|---|---|----|------------|
| Total Claims 20- 20 = | 0 | x | 18 | = \$ - 0 - |
| Independent Claims 3 - 3 = | 0 | x | 80 | = \$ - 0 - |

Multiple Dependent

| Large Fee Code | Entity Fee (\$) | Small Fee Code | Entity Fee (\$) | Fee Description |
|----------------|-----------------|----------------|-----------------|-----------------------------------------------------------|
| 103 | 18 | 203 | 9 | Claims in excess of 20 |
| 102 | 80 | 202 | 40 | Independent claims in excess of 3 |
| 104 | 270 | 204 | 135 | Multiple dependent claims, if not paid |
| 109 | 80 | 209 | 40 | **Reissue independent claims over original patent |
| 110 | 18 | 210 | 9 | **Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$)

** or number previously paid, if greater; For reissues, see above.

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type) Carolyn A. Favorito Registration No. (Attorney) 39,183 Telephone (858) 720-5195

Signature C/A

Date May 1, 2001

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

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